

# KINDERGARTEN TEACHER QUESTIONNAIRE (FALL)

## PART B

School ID#: \_\_\_\_\_

Teacher Name: \_\_\_\_\_

Teacher ID#: \_\_\_\_\_

Date Completed: \_\_\_\_/\_\_\_\_/\_\_\_\_

Prepared for the U.S. Department of Education  
National Center for Education Statistics

by Westat  
1650 Research Boulevard  
Rockville, Maryland 20850  
(301) 251-1500

### Assurance of Confidentiality

The collection of information in this survey is authorized by Public Law 100-297 and continued under the auspices of Section 404(a) of the National Education Statistics Act of 1994, Title IV of the Improving America's Schools Act of 1994, Public Law 103-382. Participation is voluntary. You may skip questions you do not wish to answer; however, we hope that you will answer as many questions as you can. No information collected under this authority may be used for any purpose other than the purpose for which it was supplied. Information will be protected from disclosure by federal statute (42 US Code 242m, section 308d). Data will be combined to produce statistical reports. No individual data that links your name, address, telephone number, or identification number with your response will be reported.

Dear Teacher,

This booklet contains questions that seek information concerning your school and your classroom as part of the Early Childhood Longitudinal Study Kindergarten Cohort (ECLS-K).

This questionnaire asks about:

- a) class organization, typical class activities, and evaluation methods;
- b) your views on kindergarten readiness;
- c) your school's climate and environment; and
- d) general information about you.

Please write your answers directly on the questionnaire by circling the appropriate number or by writing your response in the space provided.

Thank you very much for your help.

## DEFINITIONS

Reference is made in the questionnaire to children with limited English proficiency (LEP), as well as English as a second language (ESL) and bilingual education programs. For this study, the following definitions apply:

- Children with limited English proficiency (LEP): Children whose native language is other than English and whose skills in listening to, speaking, reading, or writing English are such that they have difficulty understanding school instruction in English.
- English as a second language (ESL) program: An instructional program designed to teach listening, speaking, reading, and writing English language skills to children with limited English proficiency.
- Bilingual education program: A program in which native language is used to varying degrees in instructing children with limited English proficiency.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1850-0719. The time required to complete this information collection is estimated to average 20 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collected. If you have any comments concerning the accuracy of the time estimate or suggestions for improving the survey instrument, please write to: U.S. Department of Education, Washington, DC 20202-4651. If you have comments or concerns regarding the status of your individual response to this survey, write directly to: National Center for Education Statistics, 555 New Jersey Avenue, N.W., Washington, DC 20208.

## CLASS ORGANIZATION, CLASS ACTIVITIES, AND EVALUATION

1. In a typical day, how much time do the children spend in the following activities?  
CIRCLE ONE NUMBER ON EACH LINE. DO NOT INCLUDE LUNCH OR RECESS BREAKS. IF YOU TEACH MORE THAN ONE CLASS, CONSIDER ALL CLASSES WHEN MARKING YOUR RESPONSES.

	No Time	Half hour or less	About one hour	About two hours	Three hours or more
a. Teacher-directed whole class activities? .....	1 .....	2 .....	3 .....	4 .....	5
b. Teacher-directed small group activities? .....	1 .....	2 .....	3 .....	4 .....	5
c. Teacher-directed individual activities? .....	1 .....	2 .....	3 .....	4 .....	5
d. Child-selected activities? .....	1 .....	2 .....	3 .....	4 .....	5

2. Does your classroom have the following interest areas or centers for activities? CIRCLE ONE NUMBER ON EACH LINE. IF YOU TEACH MORE THAN ONE CLASS, CONSIDER ALL CLASSES WHEN MARKING YOUR RESPONSES.

	Yes	No
a. Reading area with books .....	1 .....	2
b. Listening center .....	1 .....	2
c. Writing center or area .....	1 .....	2
d. Pocket chart or flannel board .....	1 .....	2
e. Math area with manipulatives .....	1 .....	2
f. Area for playing with puzzles and blocks (Legos, etc.) .....	1 .....	2
g. Water or sand table .....	1 .....	2
h. Computer area .....	1 .....	2
i. Science or nature area with manipulatives .....	1 .....	2
j. Dramatic play area or corner .....	1 .....	2
k. Art area .....	1 .....	2

3. How important is each of the following in evaluating the children in your class(es)? CIRCLE ONE NUMBER ON EACH LINE.

	Not important			Somewhat important			Very important			Extremely important			Not applicable
a. Individual child's achievement relative to the rest of the class.....	1	....	....	2	....	....	3	....	....	4	....	...	5
b. Individual child's achievement relative to local, state, or professional standards .....	1	....	....	2	....	....	3	....	....	4	....	...	5
c. Individual improvement or progress over past performance.....	1	....	....	2	....	....	3	....	....	4	....	...	5
d. Effort .....	1	....	....	2	....	....	3	....	....	4	....	...	5
e. Class participation .....	1	....	....	2	....	....	3	....	....	4	....	...	5
f. Daily attendance .....	1	....	....	2	....	....	3	....	....	4	....	...	5
g. Classroom behavior or conduct.....	1	....	....	2	....	....	3	....	....	4	....	...	5
h. Cooperativeness with other children .....	1	....	....	2	....	....	3	....	....	4	....	...	5
i. Ability to follow directions .....	1	....	....	2	....	....	3	....	....	4	....	...	5
j. Other method used in evaluating children (PLEASE SPECIFY): .....	1	....	....	2	....	....	3	....	....	4	....	...	5

---



---

4. Which of the following best describes your evaluation and grading practices for different types of children? CIRCLE ONLY ONE NUMBER.

I hold the same standards for most children, but I make exceptions for children with special needs (for example, children with disabilities, children with limited English proficiency)..... 1

I hold different standards for different children based on what I think they are capable of..... 2

I hold the same standards for everyone in my class..... 3

5. How many hours do you have designated as paid preparation periods per week? CIRCLE ONLY ONE NUMBER.

2 hours or less per week..... 1

More than 2 hours but less than 5 per week..... 2

5 to 9 hours per week..... 3

10 to 14 hours per week..... 4

15 or more hours per week..... 5

6. Other than time spent during the work day, how many hours a week on average do you spend preparing for the class(es) you teach – for example, preparing lesson plans, grading papers? CIRCLE ONLY ONE NUMBER.

2 hours or less per week ..... 1  
 More than 2 hours but less than 5 per week ..... 2  
 5 to 9 hours per week ..... 3  
 10 to 14 hours per week ..... 4  
 15 or more hours per week ..... 5

#### VIEWS ON READINESS, SCHOOL CLIMATE, AND ENVIRONMENT

7. How important do you believe the following characteristics are for a child to be ready for kindergarten? CIRCLE ONE NUMBER ON EACH LINE.

	Not important	Not very important	Somewhat important	Very important	Essential
a. Finishes tasks .....	1	2	3	4	5
b. Can count to 20 or more .....	1	2	3	4	5
c. Takes turns and shares .....	1	2	3	4	5
d. Has good problem-solving skills .....	1	2	3	4	5
e. Is able to use pencils and paint brushes .....	1	2	3	4	5
f. Is not disruptive of the class .....	1	2	3	4	5
g. Knows the English language .....	1	2	3	4	5
h. Is sensitive to other children's feelings.....	1	2	3	4	5
i. Sits still and pays attention .....	1	2	3	4	5
j. Knows most of the letters of the alphabet .....	1	2	3	4	5
k. Can follow directions.....	1	2	3	4	5
l. Identifies primary colors and shapes .....	1	2	3	4	5
m. Communicates needs, wants, and thoughts verbally in primary language .....	1	2	3	4	5

8. In some schools, special efforts are made to make the transition into kindergarten less difficult for children. Which of the following are done in your school? CIRCLE ONE NUMBER ON EACH LINE.

	Yes	No
a. I (or someone at the school) phone or send home information about the kindergarten program to parents.....	1 .....	2 .....
b. Preschoolers spend some time in the kindergarten classroom .....	1 .....	2 .....
c. The school days are shortened at the beginning of the school year .....	1 .....	2 .....
d. Parents and children visit kindergarten prior to the start of the school year .....	1 .....	2 .....
e. I (or another teacher) visit the homes of the children at the beginning of the school year .....	1 .....	2 .....
f. Parents come to the school for orientation prior to the start of the school year .....	1 .....	2 .....
g. Other transition activities (PLEASE DESCRIBE): .....	1 .....	2 .....

---



---

9. Please indicate the extent to which you agree with each of the following statements on children's preparation for school. CIRCLE ONE NUMBER ON EACH LINE.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. Attending preschool (for example, nursery, prekindergarten, or Head Start) is very important for success in kindergarten .....	1 .....	2 .....	3 .....	4 .....	5 .....
b. Children who begin formal reading and math instruction in preschool will do better in elementary school.....	1 .....	2 .....	3 .....	4 .....	5 .....
c. Parents should make sure their children know the alphabet before they start kindergarten .....	1 .....	2 .....	3 .....	4 .....	5 .....
d. Most children should learn to read in kindergarten .....	1 .....	2 .....	3 .....	4 .....	5 .....
e. Parents need help in learning how to teach their children how to read.....	1 .....	2 .....	3 .....	4 .....	5 .....
f. Parents should set aside time every day for their kindergarten children to practice schoolwork .....	1 .....	2 .....	3 .....	4 .....	5 .....
g. Homework should be given to kindergarten children almost every day .....	1 .....	2 .....	3 .....	4 .....	5 .....
h. Parents should read to their children and play counting games at home regularly .....	1 .....	2 .....	3 .....	4 .....	5 .....

10. Please indicate the extent to which you agree with each of the following statements about your school's climate. CIRCLE ONE NUMBER ON EACH LINE.

	<b>Strongly disagree</b>	<b>Disagree</b>	<b>Neither agree nor disagree</b>	<b>Agree</b>	<b>Strongly agree</b>
a. Staff members in this school generally have school spirit .....	1	2	3	4	5
b. The level of child misbehavior (for example, noise, horseplay, or fighting in the halls or cafeteria) in this school interferes with my teaching .....	1	2	3	4	5
c. Many of the children I teach are not capable of learning the material I am supposed to teach them .....	1	2	3	4	5
d. I feel accepted and respected as a colleague by most staff members.....	1	2	3	4	5
e. Teachers in this school are continually learning and seeking new ideas .....	1	2	3	4	5
f. Routine administrative duties and paperwork interfere with my job of teaching .....	1	2	3	4	5
g. Parents are supportive of school staff .....	1	2	3	4	5

11. At your school, how much influence do you think teachers have over school policy in areas such as determining discipline policy, deciding how some school funds will be spent, and assigning children to classes? CIRCLE ONLY ONE NUMBER.

No influence ..... 1

Slight influence ..... 2

Some influence..... 3

Moderate influence..... 4

A great deal of influence ..... 5

12. How much control do you feel you have IN YOUR CLASSROOM over such areas as selecting skills to be taught, deciding about teaching techniques, and disciplining children? CIRCLE ONLY ONE NUMBER.

No control ..... 1

Slight control..... 2

Some control ..... 3

Moderate control ..... 4

A great deal of control ..... 5

13. Please indicate the extent to which you agree with each of the following statements about your school's environment. CIRCLE ONE NUMBER ON EACH LINE.

	<b>Strongly disagree</b>	<b>Disagree</b>	<b>Neither agree nor disagree</b>	<b>Agree</b>	<b>Strongly agree</b>
a. The academic standards at this school are too low .....	1	2	3	4	5
b. There is broad agreement among the entire school faculty about the central mission of the school .....	1	2	3	4	5
c. The school administrator knows what kind of school he/she wants and has communicated it to the staff.....	1	2	3	4	5
d. The school administrator deals effectively with pressures from outside the school (for example, budget, parents, school board) that might otherwise affect my teaching .....	1	2	3	4	5
e. The school administrator sets priorities, makes plans, and sees that they are carried out.....	1	2	3	4	5
f. The school administration's behavior toward the staff is supportive and encouraging .....	1	2	3	4	5

14. Please indicate the extent to which you agree with each of the following statements on teaching. CIRCLE ONE NUMBER ON EACH LINE.

	<b>Strongly disagree</b>	<b>Disagree</b>	<b>Neither agree nor disagree</b>	<b>Agree</b>	<b>Strongly agree</b>
a. I really enjoy my present teaching job .....	1	2	3	4	5
b. I am certain I am making a difference in the lives of the children I teach .....	1	2	3	4	5
c. If I could start over, I would choose teaching again as my career .....	1	2	3	4	5



## YOUR BACKGROUND

15. What is your gender?

Male..... 1

Female ..... 2

16. In what year were you born? 19 \_\_\_\_

17. Are you of Hispanic or Latino origin? CIRCLE ONE NUMBER.

Yes ..... 1

No..... 2

18. Which best describes your race? CIRCLE ONE OR MORE.

American Indian or Alaska Native ..... 1

Asian ..... 2

Black or African American ..... 3

Native Hawaiian or Other Pacific Islander ..... 4

White ..... 5

19. Counting this school year, how many years have you taught each of the following grades and programs? WRITE THE NUMBER OF YEARS TO THE NEAREST HALF YEAR (FOR EXAMPLE, 2.5, 3.5) PLEASE INCLUDE PART-TIME TEACHING. WRITE "0" IF YOU HAVE NEVER TAUGHT THE GRADE OR PROGRAM LISTED.

### Total Years Grade or Program Taught

- |   |       |
|---|-------|
| a. Preschool or Head Start .....  | _____ |
| b. Kindergarten (including Transitional/Readiness<br>Kindergarten and Transitional/pre-1st grade) ..... | _____ |
| c. First grade.....   | _____ |
| d. Second through fifth grade .....   | _____ |
| e. Sixth grade or higher .....  | _____ |
| f. English as a Second Language (ESL) program .....   | _____ |
| g. Bilingual education program .....  | _____ |
| h. Special education program .....  | _____ |
| i. Physical education program .....   | _____ |
| j. Art or music program .....   | _____ |

20. Counting this school year, how many years have you taught in your current school including part-time teaching? WRITE THE NUMBER OF YEARS TO THE NEAREST HALF YEAR (FOR EXAMPLE, 2.5, 3.5).

\_\_\_\_\_ Years

21. What is the highest level of education you have completed? CIRCLE ONLY ONE NUMBER.

High school diploma or GED ..... 1  
Associate's degree ..... 2  
Bachelor's ..... 3  
At least one year of course work beyond a Bachelor's but not a graduate degree ..... 4  
Master's ..... 5  
Education specialist or professional diploma based on at least one year of course work past a Master's degree level ..... 6  
Doctorate ..... 7  
Other (PLEASE SPECIFY): \_\_\_\_\_ 8

\_\_\_\_\_

22. How many college courses have you completed in the following areas? CIRCLE ONE NUMBER ON EACH LINE.

a. Early childhood education ..... 0 ..... 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6+

b. Elementary education ..... 0 ..... 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6+

c. Special education ..... 0 ..... 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6+

d. English as a Second Language (ESL) ..... 0 ..... 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6+

e. Child development ..... 0 ..... 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6+

f. Methods of teaching reading ..... 0 ..... 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6+

g. Methods of teaching mathematics ..... 0 ..... 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6+

h. Methods of teaching science ..... 0 ..... 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6+

23. What type of teaching certification do you have? CIRCLE ONLY ONE NUMBER.

- None ..... 1
- Temporary, probational, provisional, or emergency certification ..... 2
- Certificate for completion of an alternative certification program..... 3
- Regular certification but less than the highest available ..... 4
- The highest certification available (permanent or long term)..... 5

24. In what areas are you certified? CIRCLE ONE NUMBER ON EACH LINE.

- |  | Yes | No |
|--|-----|----|
| a. Elementary education .....          | 1   | 2  |
| b. Early childhood .....               | 1   | 2  |
| c. Other (PLEASE SPECIFY): _____ ..... | 1   | 2  |
- \_\_\_\_\_

25. Date questionnaire completed:

\_\_\_\_/\_\_\_\_/\_\_\_\_  
MM DD YY